



10-31-05

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|---|----------------------|------------------------|--------------|
| <b>TRANSMITTAL FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number   | 10/676,567             |              |
|   | Filing Date          | September 30, 2003     |              |
|   | First Named Inventor | Michael E. CRITCHLOW   |              |
|   | Art Unit             | 3661                   |              |
|   | Examiner Name        | M. Marc                |              |
| Total Number of Pages in This Submission  | 19                   | Attorney Docket Number | 249212025700 |

**ENCLOSURES (Check all that apply)**

|   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form (original + copy for fee processing (2 pages))<br><input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"><li>• Form PTO/SB/08a/b (1 page)</li><li>• Return Receipt Postcard</li></ul> |
| <input checked="" type="checkbox"/> Amendment/Reply (11 pages)<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)  |   |  |
| <input checked="" type="checkbox"/> Extension of Time Request (1 page)<br><input type="checkbox"/> Express Abandonment Request  |   |  |
| <input checked="" type="checkbox"/> Information Disclosure Statement (Supplemental) (3 pages)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |
| <b>Remarks</b>  |   |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                         |                       |
|--------------|-------------------------|-----------------------|
| Firm Name    | MORRISON & FOERSTER LLP | (Customer No.: 25226) |
| Signature    |                         |                       |
| Printed name | Christopher B. Eide     |                       |
| Date         | October 27, 2005        | Reg. No. 48,375       |

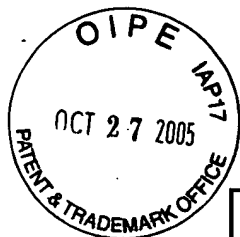
Client Ref. No.: Q04-1008-US1

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV544975058US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 27, 2005

Signature:

(Georgina Matos)



PTO/SB/17 (12-04v2)

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|  |                    |                          |                      |
|--|--------------------|--------------------------|----------------------|
| <b>FEE TRANSMITTAL</b><br><b>For FY 2005</b>                                   |                    | <b>Complete if Known</b> |                      |
|  |                    | Application Number       | 10/676,567           |
|  |                    | Filing Date              | September 30, 2003   |
|  |                    | First Named Inventor     | Michael E. CRITCHLOW |
|  |                    | Examiner Name            | M. Marc              |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |                    | Art Unit                 | 3661                 |
| <b>TOTAL AMOUNT OF PAYMENT</b>   | <b>(\$)</b> 300.00 | Attorney Docket No.      | 249212025700         |

|   |   |
|---|---|
| <b>METHOD OF PAYMENT</b> (check all that apply)   |   |
| <input type="checkbox"/> Check  | <input type="checkbox"/> Credit Card  |
| <input type="checkbox"/> Money Order  | <input type="checkbox"/> None   |
| <input type="checkbox"/> Other (please identify):   |   |
| <input checked="" type="checkbox"/> Deposit Account   | Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP     |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                |   |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

|   |                     |   |                    |                              |                                  |                              |                       |                      |
|---|---------------------|---|--------------------|------------------------------|----------------------------------|------------------------------|-----------------------|----------------------|
| <b>FEE CALCULATION</b>  |                     |   |                    |                              |                                  |                              |                       |                      |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                    |                              |                                  |                              |                       |                      |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b> |                              | <b>EXAMINATION FEES</b>          |                              |                       |                      |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Small Entity Fee (\$)</b>                            | <b>Fee (\$)</b>    | <b>Small Entity Fee (\$)</b> | <b>Fee (\$)</b>                  | <b>Small Entity Fee (\$)</b> | <b>Fees Paid (\$)</b> |                      |
| Utility   | 300                 | 150   | 500                | 250                          | 200                              | 100                          | 0.00                  |                      |
| Design  | 200                 | 100   | 100                | 50                           | 130                              | 65                           | 0.00                  |                      |
| Plant   | 200                 | 100   | 300                | 150                          | 160                              | 80                           | 0.00                  |                      |
| Reissue   | 300                 | 150   | 500                | 250                          | 600                              | 300                          | 0.00                  |                      |
| Provisional   | 200                 | 100   | 0                  | 0                            | 0                                | 0                            | 0.00                  |                      |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                    |                              |                                  |                              | <b>Small Entity</b>   |                      |
| <b>Fee Description</b>  |                     |   |                    |                              |                                  |                              | <b>Fee (\$)</b>       | <b>Fee (\$)</b>      |
| Each claim over 20 (including Reissues)   |                     |   |                    |                              |                                  |                              | 50                    | 25                   |
| Each independent claim over 3 (including Reissues)  |                     |   |                    |                              |                                  |                              | 200                   | 100                  |
| Multiple dependent claims   |                     |   |                    |                              |                                  |                              | 360                   | 180                  |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b>         | <b>Multiple Dependent Claims</b> |                              | <b>Fee (\$)</b>       | <b>Fee Paid (\$)</b> |
| 28  |                     | 0   | 50.00              | 0.00                         |                                  |                              | 360.00                | 0.00                 |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b>         |                                  |                              |                       |                      |
| 3   |                     | 0   | 200.00             | 0.00                         |                                  |                              |                       |                      |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                    |                              |                                  |                              |                       |                      |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                    |                              |                                  |                              |                       |                      |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                    | <b>Fee (\$)</b>              | <b>Fee Paid (\$)</b>             |                              |                       |                      |
| - 100 =   | /50                 | (round up to a whole number) x                          |                    | 250.00                       | 0.00                             |                              |                       |                      |
| <b>4. OTHER FEE(S)</b>  |                     |   |                    |                              |                                  |                              | <b>Fees Paid (\$)</b> |                      |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                    |                              |                                  |                              | 0.00                  |                      |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month   |                     |   |                    |                              |                                  |                              | 120.00                |                      |
| 1806 Submission of an Information Disclosure Statement  |                     |   |                    |                              |                                  |                              | 180.00                |                      |

|                     |                     |                                   |                  |
|---------------------|---------------------|-----------------------------------|------------------|
| <b>SUBMITTED BY</b> |                     |                                   |                  |
| Signature           |                     | Registration No. (Attorney/Agent) | 48,375           |
| Name (Print/Type)   | Christopher B. Eide | Telephone                         | (650) 813-5720   |
|                     |                     | Date                              | October 27, 2005 |